



The Army Nurse

For Army Nurses

Medical Department Dietitians

Medical Department Physical Therapists

Occupational Therapy Aides

VOL. 1 No. 10

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THE ARMY NURSE
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THIS ISSUE

Section	Page
The Cover.....	2
Physical Therapist Awarded Legion of Merit.....	2
On Reassignment.....	3
Third Service Command Basic Training Anniversary.....	3
A Record of Gallantry.....	5
Warship Named for Navy Nurse.....	6
Army Hospitals to Employ Graduate Cadet Nurses.....	6
The Information and Education Division (For Your Information)..	6
From The Home Front.....	8
Wrist Watches For Nurses.....	9
Important Notice.....	9
New York City Offers Numerous Privileges For Nurses.....	9
Specific Facts.....	11
The Medical Department Dietitian..	13
Inspection and Customs Clearance of Baggage.....	14
A Description of The Training Course in Physical Therapy, 1944 At Rushneil General Hospital.....	14
Physical Therapists in Oversea Theaters.....	15
Concerning Awards.....	16
Retention Of Officers On Active Duty For Limited Service.....	16
Questions and Answers.....	16

THE COVER

2nd Lt. HELEN LOUISE MATCHETT PHYSICAL THERAPIST, U. S. ARMY sets a time-clock in preparation for the administration of an ultraviolet irradiation with a carbon arc lamp. This treatment has a wide field of usefulness in local and general treatment of numerous skin lesions, as well as in selected medical, surgical, and orthopedic conditions.

PHYSICAL THERAPIST AWARDED
LEGION OF MERIT

Approximately 1,000 physical therapists are doing a great job with Army hospitals all over the world. Commanding officers are quick to take issue with anyone who dares to doubt their value, but until recently little public recognition has been given them. Lieut. Metta L. Baxter of the 21st General Hospital in Italy is the first to be cited "for exceptionally meritorious conduct in the performance of outstanding service from 8 July to 8 September 1943." The War Department has awarded her the Legion of Merit.

Were anyone to discuss this award with Lieut. Baxter, she would no doubt reply that she "didn't really do anything outstanding to deserve it," but that isn't the point... in the eyes of her commanding officer and her associates, she was performing "exceptional" work. Indications of her ingenuity are present even in her reports to Headquarters.

"We found a bicycle here and have constructed measuring devices and other exercise equipment. We have a couple of 'home made' whirlpools which our ingenious plumbers constructed out of the bottom of a steam table," and from a personal letter to Major Vogel, Director of P.T.'s, "In addition to the regular physical therapy work, I find we have to supervise installations, persist in putting in work orders and hounding depots until equipment is obtained. My motto has been 'Never take 'no' for an answer and there is no such word as 'can't'."

Lieut. Baxter is a keen, alert physical therapist, intensely interested in maintaining professional standards. In order that physical therapists assigned to hospitals in Italy might have the opportunity to discuss their professional problems, she organized the first group luncheon of this nature to enable all P.T.'s to "discuss various things pertaining to our Departments" and "to make plans for the future."

Lieut. Baxter is a graduate of the Kansas State College at Manhattan, Kansas, holding a B.S. degree with major in physical education. She is a graduate of the Training Course in the Physical Therapy Department, Army Medical Center, Washington, D. C., receiving her certificate in 1941. She was assigned to the 21st General Hospital while it was stationed at Fort Benning, Georgia and was promoted to 1st Lieut. in November, 1943.

Lieut. Baxter's home is at 1302 Eagle Vista Drive, Los Angeles, California.



1st Lieut. Metta L. Baxter, Physio-therapist, awarded the Legion of Merit. Lieut. Baxter was cited "for exceptionally meritorious conduct in the performance of outstanding duties from 8 July to 8 September, 1943." Her home is in Los Angeles, California.

ON REASSIGNMENT

Nurses, on their return from overseas, report to a Reception Station prior to leave and to a Reassignment Station for their new station assignment. At this latter place, the nurse is permitted to state the station of her choice. This choice is voided many times when the nurses request immediate reassignment overseas, (as W.D. Regulations prohibit the return of personnel overseas until six months have been spent in the Continental United States) or if the nurse requests assignment to the Army Air Forces or Air Evacuation School, as no vacancies exist in these stations. There are also no vacancies in the installations under the Transportation Corps. That is, all assignments are made to ASF installations. In most instances, the assignments are to general hospitals rather than to station hospitals, as the former care for the wounded returned from overseas, and it is generally conceded that nurses who have had similar experience can more readily establish rapport with these patients.

Military occupational skills have to be determined too, and it is believed that every nurse who has a skill listed among the acute shortages will prefer assignment where she can use this skill even though it may not conform with the preferred geographical location.

THIRD SERVICE COMMAND BASIC TRAINING ANNIVERSARY

The first anniversary celebration of the Nurses' Basic Training Center at Fort George G. Meade, Maryland, was held 7 September in the Officers' Recreation Hall at the Regional Station Hospital.

To Army nurses long in the service, this ceremony would have cheered tired hearts, for it was the realization of a dream that most every nurse who has loved the Army down through the years has held in the back of her mind....the dream that someday, somehow, the spirit of the Army could be indoctrinated into young nurses entering the service...an

indoctrination that would greatly assist the young nurse in her adjustment to military life.

Major Ester V. Newkirk is the Director of the Basic Training School and can, without exaggeration, be given the big bouquet of orchids that is due her for the performance of those young women. Smartly dressed in perfect uniform, erect carriage, dignity with pleasant sociability, - pride in their profession, - pride in their so-far small part of the Army, these young women can do much to carry out the traditions established so many years ago and carried out under difficulties by the fine women of the past.

Major Morris L. Grover, M.C., is the Medical Training Officer in charge of the school and early in the ceremony, he outlined the course as it has been given to over 1,400 nurses in the past 12 months.

"Reports from various theaters of operations show that nurses who have received this training were better qualified as a result of the orientation and indoctrination they had received during the training period. Furthermore, on the basis of voluntary statements made by nurses who had served in overseas theaters with units prior to being assigned for training at the Center, we are satisfied that the Training Center has assumed a well earned position in the general training program. To support this evidence the Training Center has been called upon to make available its facilities to Medical Department dietitians and physical therapists.

"During the past year a total of 1450 nurses were given this basic training and, in addition, 34 dietitians and 17 physical therapists successfully completed the course. These students, or trainees, came from far and wide, representing rural and urban communities in all parts of the Third Service Command. They came from remote hamlets in which they served tiny hospitals, as well as from large municipalities in which they

were members of large and well organized hospital staffs. Many had university affiliations while others had seen previous service in various governmental agencies under the public health service, or state and city departments.

"We must appreciate the fact that coming directly from civilian life, the vast majority of trainees found it necessary to suddenly and rapidly pass through a period of readjustment, from a relatively easy way of life to the disciplined routine and existence of the military service. They often had to sacrifice such comforts and conveniences which are ordinarily considered essential to normal civilian existence. This they did without complaint and with truly admirable spirit. Imbued with a strong feeling of patriotism it was natural that this should be so. On the other hand, we find that this investment of sacrifice, if we may so call it, yielded well paying dividends in the form of general improvement in health and physical as well as mental well-being of the trainees when they terminated the courses of instructions. There was increased sparkle in their eyes, a healthier glow to their cheeks and sprightlier gait in their step. This was, of course, achieved as a result of the regular drills and outdoor exercises that were part of the training schedule."

Major Grover paid high compliment to the faithful and conscientious cooperation of the Regional Hospital staff, to Colonel Harry Clark, the Commanding Officer, to Major Anne Pilgaard, Director of Nurses at the Hospital, and to Lieut. Colonel Viola Ferguson, former Chief Nurse who played a 'dominant role in molding the present destinies of the Center." Major Grover also complimented Major Newkirk, Director of the Training Center, whose 'bubbling energies, coupled with richly endowed gifts of charm and personality, have undeniably made this undertaking so successful."

In the absence of Colonel Blanchfield, Superintendent of the Army Nurse Corps, Major Edna H. Groppe, Director, Nursing Personnel, SGO, gave the address of the evening.

"All participants in your Basic Training Course have emphasized the high standard of your performance in the military subjects that you have completed," Major Groppe said, "and now at the close of the program, your group will be separated as you are assigned to the various installations in the Third Service Command or throughout the world."

"Your contacts on the hospital wards, though limited, have been sufficient to assure you that military hospitals, in the main, are not unlike civilian hospitals. Our purpose in being in the Army Nurse Corps is the same --- to assure skilled nursing care, and in this instance, to the men of our military forces rather than to the members of the community in which we were located.

"Just as the purpose is similar, so is the job to be done--we work with the same professional workers--doctors, dietitians, physical therapists, social workers, though the latter may now be in the Red Cross uniform; and enlisted men and women in place of orderlies and attendants as in civilian life. We fill out similar forms -- diet slips, laundry lists, laboratory slips, clinic, x-ray, et cetera.

"The remark is frequently made that the predominating assignment in the Army Nurse Corps is "paper work." Some of our time, it is true, must be given to the so-called paper work and to various types of administrative duties that are also found on a ward or department in a civilian hospital.

"Nursing is today, as it has been in the past, the most important duty of an Army nurse. In military hospitals just as in civilian hospitals there is great personal satisfaction to be derived in using one's nursing skills to assist the return of acutely ill patients to health.

"We feel confident that the Army Nurse Corps can depend on you to carry on. Supervision and teaching of aux-

iliary personnel can give them a certain degree of competence, but we cannot expect them to replace the nurse when the patient is very uncomfortable or seriously ill.

"You have been selected for the Army Nurse Corps because of your professional competence. To be both good soldiers and good nurses will pay high dividends not only to you, but to your patients, to the Army Nurse Corps, to the nursing profession, to your school and to your community."

Following the program, a huge "birthday" cake, baked by the Quartermaster's Cook and Baker's School, and decorated with large Army Nurse Corps insignia was carried in, cut and served with coffee and punch.

A RECORD OF GALLANTRY (Editorial reprinted from the Boston Globe)

Exactly 100 women of the Army Nurse Corps have now been decorated in this war. Announcement of this even number provides a milestone at which to pause for a backward glance at the Corps' record. It is a gallant one indeed. Army nurses have cheerfully shared the dangers of the front lines on three continents, they have endured with patience the rigors of duty in areas unfit for human habitation and they have carried on their work heroically under conditions of the most extreme peril.

The 100 women who have been decorated --most of them, at any rate--earned their honors under such conditions. Some were at Manila and on Bataan, some were at Pearl Harbor on the day of the attack, and some were in that tent hospital on the Anzio beachhead when the Germans ruthlessly bombed it. But Army nurses everywhere, even those in this country's hospitals far from the sound of gunfire, daily perform their duties with such energy and good will, daily prove themselves such wells of strength and courage for the ill and wounded in their care, that civilians would decorate each last one of them. That may be why the Army nurse's uniform is coming to be regarded as a decoration itself.

WARSHIP NAMED FOR NAVY NURSE
(From Pa. State Nurses' Assoc. Bulletin)

For the first time in U. S. Naval history, a warship has been named for a woman. The destroyer HIGBEE was given the name of Mrs. Lenah S. Higbee, first Superintendent of the Navy Nurse Corps. She was the only woman to win the Navy Cross while still living.

**ARMY HOSPITALS TO EMPLOY
GRADUATE CADET NURSES**

Army hospitals, in desperate need of qualified, graduate nurses, will employ graduates of the U. S. Cadet Nurse Corps who have taken their Senior Cadet period in Army hospitals and who have applied for commissions in the Army Nurse Corps, the War Department has announced.

Many of these graduate nurses cannot be accepted for commission in the Army Nurse Corps until they have taken the State Board examinations for registered nurses which, in many cases, is not given until some time after the graduation date.

Under a new directive issued by Army Service Forces, such candidates who wish to work as graduate nurses during this period may be given appointments, not to exceed six months in duration, as civilian employees in Army hospitals.

Such appointment in the position of "nurse" is allocated to the Civil Service grade SP-5 and a nurse so employed will be paid \$1800.00 per year plus overtime. Requests for approval of appointment may be made one month before the anticipated date of graduation.

These appointments will be made only by Army hospitals located in States whose laws permit graduates of schools of nursing to be employed as trained nurses before they have passed the State Board examinations and will be made subject to conditions prescribed by such laws.

Appointments of nurses who fail to pass the examinations will be terminated as soon as the results are known.



Cadet Nurse Violet Elizabeth Goldsmith exchanges her Cadet Uniform Cap for the Army Nurse Cap. Smart Girl!

**THE INFORMATION AND EDUCATION DIVISION
(FOR YOUR INFORMATION)**

The Director of the Information and Education Division ASF is charged with the planning, production, dissemination, and supervision of materials and programs for the information, orientation, and nonmilitary education of troops and with research on troop attitudes, in order to assist commanders in maintaining a high state of morale.

The term "information and education" embraces orientation, information, education, research on factors affecting morale, and related morale activities provided by the Information and Education Division.

The supervision of orientation, information and education functions relating to hospital patients by service command headquarters will be performed by reconditioning divisions and reconditioning personnel. Orientation, information and education functions for

general and station hospitals except Army Air Forces hospitals, will be conducted as follows:

(1) In hospitals with authorized bed capacities of less than 250, these functions for hospital patients will be performed by personnel within current allotments, assigned to reconditioning duties; and for operating personnel by personnel provided by Service Command personnel.

(2) Hospitals with authorized bed capacities of 250 to 500 are authorized one officer, information-education, in addition to current allotments, who will conduct or directly supervise orientation, information, and education functions for both hospital patients and hospital operating personnel, and who will also serve as educational reconditioning officer.

(3) In hospitals with authorized bed capacities in excess of 500, these functions for both hospital patients and operating personnel will be performed by the educational reconditioning officer. Where the total authorized hospital bed capacity plus the authorized strength of hospital operating personnel is in excess of 2,000, current allotments will be increased by one officer, information-education, who will conduct or directly supervise the functions of orientation, information, and education for hospital operating personnel and who will assist the educational reconditioning officer in the conduct and/or supervision of these functions for hospital patients.

(4) Convalescent officer and enlisted personnel may be utilized in the conduct of the functions of orientation, information and education.



Sgt. Herman Biermann (R) who has been taught fly tying by the Arts and Skills Corps of the American Red Cross, in turn teaches S/Sgt. Robert H. Riseling how to make a lure. Photo was taken at the Westover Field hospital where both men are convalescing.

All military personnel, commissioned and enlisted, on active duty will be given training in orientation through a course to be known as the Army Orientation Course. The objectives of this course are:---

a. To acquaint all recruits with factual information as to the causes and events leading to the United States becoming a combatant in a global war in December 1941.

b. To inform all military personnel on the course of military actions particularly those in which United States forces have participated since 7 December 1941, and on other phases of the war effort of the United States.

c. To inform all military personnel of the principles for which we are fighting and of the dangers to American principles arising from Axis policies and Axis aggressions.

d. To inform all military personnel of the nature of the enemy, as a supplement to their regular training.

e. To fix in the mind of the American soldier a sense of the importance of his personal role and responsibilities in the current struggle.

(From War Department Circular 360, dated 5 September 1944).

FROM THE HOME FRONT
By Raidie Poole
1st Lt., A.N.C.

You would be thrilled if you could see the role of drama and service which the Army nurses are playing right here on American soil, here in Cushing General Hospital. Soldiers who have been miraculously retrieved from death's door in evacuation hospitals are naturally and touchingly lifted up just to be back in the good old U.S.A., and they are serenely pleased to be in a good hospital for major and minor repairs and a general overhauling.

To us at Cushing General Hospital our bravest heroes return with extensive combat wounds. It is here that the excitement of uncertainty gives way to stark reality. Much has to be done.

Of course there are many surgical operations, which the nurse helps to make as safe and successful and painless as possible. The endless program of traction, splints, casts, dressings, medications and "routine care" is carried along with patience and understanding. Besides the nurse few people appreciate her big job of ward administration, including the coordination and supervision of the work of other ward personnel, cadet nurses, nurse's aides, medical soldiers and hired civilians.

At the same time the Army nurse achieves an equally important feat in building and sustaining the morale of men whose emotions and dispositions, along with their bodies, have taken a hard beating.

It is generally accepted that the Army nurse overseas exerts a tremendous, intangible benefit by her very presence, but here in America these same blessings, just as great as anywhere on earth are much taken for granted.

No news photographer was present the other afternoon to capture the pathos that Lt. B. so nicely dealt with. From way up in New Hampshire came an anxious mother to see her wounded son for the first time since he invaded Italy. To see him thin and confined to a wheelchair with his leg shrunken and stiff just broke her heart. She went to the Nurse's office and burst into tears. Lt. B. assured the mother that her son was the hero of the ward, that he was busy and happy all day long, that he would be nearly as good as new shortly, and that his chances for a normal happy life are excellent. Thus both the mother and the son were consoled, for he had been as deeply concerned about her worrying as she was worried about his injury.

Even a newsflash could not show the greatness of the moral victory in persuading our scarred Tony to "tie flies", our Tony who will never leave his bed except for a short ride to the post exchange or the Red Cross Building on a litter. Such diversions are possible only when the too-busy Army nurse takes him while she is off duty, but it gives him something to think about and to talk about. Poor Tony is duplicated and multiplied in all our general hospitals.

Army nurses at Cushing, typically American, do things in a big way. When a hospital train arrives with hundreds of wounded soldiers, the nurses pitch in and work day and night till all needs are cared for and the patients are comfortable. They give up all time off duty indefinitely, and they "scrub" in the operating room for nine or ten hours at a stretch. One new nurse even lined up the whole ward of dirty, disheveled, unbarbered heads for shampoos (the patients' hands in casts or otherwise disabled) and only laughed when she found that a couple of wardmen had joined the line and enjoyed a shampoo too.

The Cushing General Hospital nurse serves our enemy-battered soldiers. She works day and night to mend and repair, to heal and soothe, to comfort and reassure. She feeds and cares for her patients like babies while they are given the best that medicine and surgery can offer. She is meeting the challenge to give these soldiers a new life with all possible physical strength and rekindled enthusiasm.

WRIST WATCHES FOR NURSES

As a result of increased demand, the Army Exchange Service has made arrangements to procure wrist watches for sale to Army nurses ONLY. These watches will have the sweep second hand and will be available in Post Exchanges between the 15 October and 1 November. Cost to be approximately \$5.00. If these watches are not available at your Post Exchange, ask the P.X. officer to order one for you.

IMPORTANT NOTICE

All female personnel who are not entitled to a monetary uniform allowance are authorized to receive and retain permanently as their personal property an initial issue of clothing. Requisitions for the issue of this clothing or for the completion of the issue MUST BE SUBMITTED through normal supply channels (a) In the Continental United States BEFORE 31 December 1944 (b) Outside the Continental United States BEFORE 28 February 1945. Any requisitions arriving at depots or ports of supply after the deadline will be referred, with all substantiating data, through military channels to The Surgeon General for consideration. ALL NURSES, P.T'S AND DIETITIANS ARE URGED TO READ WAR DEPARTMENT CIRCULAR 387 dated 27 September 1944.



Her Majesty, Queen Elizabeth of England visited American hospitals a few weeks ago. She is shown here with Commanding Officer, Colonel Lester Dykes, Capt Kasmark A.N.C. and a sergeant from The Signal Corps.

NEW YORK CITY OFFERS NUMEROUS PRIVILEGES FOR NURSES

Nurses are no exception to the familiar adage 'All work and no play' make for

dullness. Army nurses stationed in or near New York City, or those fortunate enough to be enjoying a leave of absence in that vicinity, have numerous outstanding recreational privileges afforded them. Many sources of pleasure in the utilization of leisure time are at hand for Army nurses who wish to avail themselves of the opportunity.

The magnificent Women's Military Service Club, located at 451 Madison Avenue in New York City, and formerly the famous Whitelaw-Reid Mansion, welcomes Army nurses. The Information Bureau on the main floor will aid you in becoming oriented to the Club. An attractive cafeteria, on the same floor, serves delectable food, and at cost. Complete breakfasts can be had for 25 cents, and luncheons are also sold on an ala-carte basis. On the second floor, a luxurious lounge for the officers is a delightful atmosphere for visiting with friends and 'catching up' on the seemingly 'ever-owed' letterwriting list. Current magazines and newspapers also lend diversion. Soft, soothing music, presented by the Muzac system, leaves nothing to be desired in this convenient and comfortable set-up. Over-night lodging is obtainable on Monday through Friday each week, in a lovely furnished boudoir, which accommodates ten officers. The charge is 50 cents per night, which is paid for in advance at the room-desk on the main floor. Telephoning for a reservation, if possible, often assures one of accommodation. Otherwise, secure lodging early in the day of the anticipated stop-over, at the desk. In addition, a rapid pressing service is available at a minimal cost daily, in the basement of the building.

Tickets for a variety of radio broadcasts may be secured at the Information Bureau, on the day of the performance. Music lovers are entitled to an unusual treat,--the possibility of hearing the New York Philharmonic Orchestra at Carnegie Hall, on Thursday evenings or Friday afternoon, during the Fall and Winter months, attending the Metropolitan

Opera in its season, as well as the Ballet Russe de Monte Carlo, and other noted concerts which may be scheduled from time to time. In order to be eligible for tickets, nurses should register as soon as possible at the Information Bureau, so that their names may be placed on the so-called 'Music-Lovers' list.

For a temporary period of refreshment, the exquisite Elizabeth Arden Lounge, located on the mezzanine of the Biltmore Hotel at Madison Avenue and 43rd Street, as part of the Service Women's Center, provides an elaborate and well-supplied make-up room and writing desks. Radio broadcast tickets are also supplied in this hospitable atmosphere. It is sponsored by the Metropolitan Alumnae Association of Kappa Kappa Gamma Sorority, and graciousness is certainly the keynote of this setting. Other valuable information, in attempting to make your stay in New York more pleasurable, is readily given, as well as assistance in obtaining hotel accommodations at a reasonable rate.

At the Officers' Service Committee in the Hotel Commodore on Lexington Avenue at 42nd Street, passes are distributed to the Observation Roof of the Rockefeller Center Building, as well as the similar tower of the Empire State structure. Tickets to Broadway stage hits and musical productions can be secured at reduced rates, in the lounge of this service committee. Invitations to dances and parties are also a portion of this service. For matinee performances, the ticket sale begins at 10 o'clock in the morning, and commencing at 2:30 p.m., tickets for the evening shows are available.

Nurses in service only are entitled to the rare delight of receiving complimentary tickets to the Radio Music City Hall, through the American Red Cross Headquarters, on 315 Lexington Avenue. The admission tickets are secured on the seventh floor of the building, through the courtesy of the Director of the Red Cross Nursing Service.

Miss Florence Johnson. And if you never even got to the Music Hall, you would enjoy a rich experience in meeting the charming and affable Miss Johnson. There is nothing which thrills her more than having the nurses in uniform call upon her. Certainly you will leave her office with a feeling of gratification and further inspiration in your work.

So,--here is New York at your disposal, Army nurses! Make the most of it. Get around, see places of note, enjoy worthwhile entertainment! Military life will surely be cheerier for you, if you fill your leisure with enjoyable and constructive recreation, while you may.

SPECIFIC FACTS

(Third in a series of articles concerning vital professional problems. From the Executive Secretary, National Nursing Council for War Service, to the Editor, R.N.)

The question of who supplies the funds for the work of the National Nursing Council for War Service has recently been discussed in your pages, and we feel that specific facts in regard to our support should be furnished you.

Only in the first months of the Council's existence as an agency to coordi-



Bing Crosby looks unhappy as Lient. Ruby C. Wilie, ANC, New Orleans, La., left, prepares to give him an injection. Fred Astaire stands ready with the anesthetic and Lient. Ruby A. Flaming, A.N.C., Baton Rouge, La., right, keeps check on the singer's pulse. Crosby and Astaire are touring France with U.S.O. shows.

nate the wartime nursing programs of the national nursing organizations did nurses themselves finance our activities. Up to April 1942, the Council received its budget from voluntary contributions of \$13,990.83, received from 42 state Nurses' Associations and their districts; from a few individuals; and from modest contributions made by the A.N.A., N.I.N.E., N.O.P.H.N., the National Association of Colored Graduate Nurses, and the Association of Collegiate Schools of Nursing. Without this generous effort and the vision which stimulated it, it would have been impossible to present a united front. Local responsibilities, however, grew to the extent that state funds were needed at home, while it became increasingly clear that more money would be needed for a reasonably adequate national program.

Since April 1942, the Kellogg Foundation has been the Council's principal source of support. The General Education Board finances a special project for coordination of Negro nursing with the war effort, and the Wilbank Fund has also contributed to a special project. Certain activities for the recruitment of student nurses--such as the Clearing Bureau, which answers inquiries from prospective students to Box 88, New York, and the college counselling program -- are financed by contract with the U.S. Public Health Service.

"Where do the national nursing organizations come into the picture?" has been asked. Their Boards of Directors elect representatives to the Council Corporation, from which the members of the Council's Board of Directors are elected. These elected members participate in its decisions and policy making. Nurses and individuals from all over the country have served, or are serving, on our committees. The national organizations do not now contribute to the Council's financial support, except when supporting a request for a special project. A.N.A., for example, has made a small grant for the wider distribution of the digest of minutes of the Council's monthly meetings.

The membership of the National Nursing Council now consists of representatives of the following: American Nurses' Association, National League of Nursing Education, National Organization for Public Health Nursing, Association of Collegiate Schools of Nursing, National Association of Colored Graduate Nurses, American Red Cross Nursing Service, Council of Federal Nursing Services, Division of Nurse Education, U.S. Public Health Service; Nursing Division, Procurement and Assignment Service, War Manpower Commission; Subcommittee on Nursing, Health and Medical Committee, International Council of Nurses, American Hospital Association, and Members-at-large, including nurses, white and colored lay members, and a physician.

The use of the practical nurse in the wartime program was recognized as a pressing problem in the spring of 1943. Under a Council Committee on Attendant and Practical Nurses, which functioned for less than a year as one of the regular activities of the Council and then referred the question for continuing attention to a joint committee of the A.N.A., N.I.N.E., and the N.O.P.H.N., which had been studying these problems for a number of years, the situation was analyzed. It was realized that, unless professional nursing organizations took some responsibility now, the whole matter would be taken up by other than nursing groups. War shortages had accentuated the need for auxiliary personnel, while approved schools were not getting enough applicants, and short cuts were being taken which threatened unfortunate effects on patients, practical nurses, and professional nurses as well. The Council, therefore prepared recruitment materials which stressed approved schools; placed these materials at the disposal of the schools listed and of state Nursing Councils wishing to use them; and gave careful information to women writing to Box 88. (The mailing address of applicants for the United States Nurse Cadet Corps) The funds used for this project, carried on as one of the regular activities of the Council, came from the budget furnished

by the Kellogg Foundation. No support for any Council activity concerning the practical nurse has ever been taken from "Nurses' dues."

We always welcome questions about the program of the National Nursing Council for War Service. We hope that you will publish this letter in a prominent place, as that all nurses reading the article in your April issue will find the correct answers to their questions.

THE MEDICAL DEPARTMENT DIETITIAN

The Medical Department Dietitian has now passed her first anniversary as an officer in the Army. This group has more than doubled in number and before this year is up it should be tripled. Dietitians are on duty on hospital ships, in every theater of operation, and in the station and general hospitals in the United States. Before discussing the work of the dietitians their educa-

tional experience and background should be considered. The basic requirement is a bachelor's degree with a major in Foods and Nutrition or Institution Management. The following subjects are completed: Chemistry, physiology and physiological chemistry, to provide an understanding of the constituents of food and the need the human body has for each nutrient; bacteriology, for an appreciation of proper care of food supplies and causes of deterioration; food preparation, which includes the changes in food which result from various types of cooking procedure; quantity cooking, marketing, accounting and economics, the selection of supplies and necessary equipment which gives the individual information necessary to one who is responsible for food served to large groups. To round off the course, the dietitian takes work in social science and education for she must understand human relations and be able to teach the patients and employees.



The Dietitian with the Mess Officer and the Mess Sergeant.

After receiving her degree the dietitian must complete an approved training course as a student dietitian, which is the practical application of the scientific knowledge gained in college, or have two years of hospital experience in a hospital approved by The Surgeon General. This experience must include diet therapy, planning adequate menus, supervising employees in food preparation and service, controlling food costs, and ordering food supplies and equipment.

With such a background the dietitian brings a wealth of knowledge and experience to the hospital. She is called upon to use it every day.

AR 40-590, dated 29 August 1944, outlines the duties of the Medical Department Dietitian as follows:

--"The commanding officer may have, in addition, Medical Department dietitians whose duties will be the planning of all menus for patients, the requisitioning through the mess officer of all food supplies and equipment, the supervision of preparation and serving of food to patients, the instruction of special diet patients, assistance in the supervision of mess sanitation, and the maintenance of accounts and records of the dietetic department. All mess records will be made available to the head dietitian. The head dietitians will regularly inspect stocks of food on hand in order to prevent food spoilage and to insure proper turnover of slow-moving stocks."

INSPECTION AND CUSTOMS CLEARANCE OF BAGGAGE

W.D. Circular No. 335 dated 17 August 1944 is intended to establish a uniform system for inspection, declaration, and customs of clearance of baggage of the Armed forces of the United States by water transportation from overseas commands to the United States. By mutual agreement between the War Department and the Bureau of Customs, baggage of units, groups of individuals, or casuals

under the jurisdiction of transport commanders (when such baggage is accompanied by the owner) will be inspected for compliance with customs regulations by Army officers at overseas ports of embarkation, and except for dutiable or restricted articles will not normally be submitted to further inspection by customs officers at the United States ports. Statutory Authorities providing for free entry of baggage are as follows: Paragraph 1798, Tariff Act of 1930, as amended, provides in part as follows: that in case of residents of the United States returning from abroad, all wearing apparel, personal and household effects, and, in case of individuals returning from abroad, all professional books, implements, instruments, and tools of trade, occupation, or employment, taken by them out of the United States to foreign countries shall be admitted free of duty, without regard to their value, upon their identity being established under appropriate rules and regulations to be prescribed by the Secretary of the Treasury: Provided further that, up to but not exceeding \$100 in value of articles (including distilled spirits, wines and malt liquors aggregating not more than one wine gallon and including not more than 100 cigars) acquired abroad by such residents of the United States as an incident of a foreign journey or personal or household use souvenirs or curios, but not brought on commission or intended for sale, shall be free of duty".

Further information can be obtained by reading the aforementioned Circular.

A DESCRIPTION OF THE TRAINING COURSE IN PHYSICAL THERAPY, 1944 AT BUSHNELL GENERAL HOSPITAL

In accordance with the Training Program for Physical Therapists prescribed by the Surgeon General's Office in Washington, D.C., a civilian training school for this work was established at Bushnell General Hospital 10 July 1944. The course given is identical with those given in various Army training centers throughout the country. The course

provides for all student instruction and practice work to be completed in the first six months, after which time, the student becomes an apprentice for an additional six months before she receives her commission in the A.U.S. as a physical therapist. The acceptance of a commission, of course, makes her available for duty overseas or in this country as is necessary.

The Physical Therapy School is on the second floor of the building in which the Physical Therapy Clinic is located. It is composed of a lecture room, demonstration and practice room, two small treatment rooms, a supply room, locker room, and office.

With regard to the teaching of the various courses, the medical subjects are being taught by doctors of the hospital staff while the subjects on physical therapy are being taught by the trained commissioned physical therapists. Until the student is ready for practice, her work is confined to lectures and demonstrations. Anatomical and laboratory demonstrations are given in connection with the courses in Histology, Anatomy, Physiology and Pathology. At every possible opportunity, the student is taken to the wards or clinics throughout the hospital in order that she may observe therapy as it is carried on there. X-rays, anatomical charts, skeletons, anatomical drawings, and textbooks are used as teaching aids.

The first class at Bushnell General Hospital entered with an enrollment of 20 students, which is the greatest number that can be handled satisfactorily at this hospital. They are quartered in one wing of Civilian Quarters, Building 6, each having a private room and sharing a bath with one other student. Messing is taken care of in the Officers' and Nurses' Mess. Students assigned to this training course are selected in the Office of The Surgeon General from registers submitted by the U. S. Civil Service Commission. Students are required to purchase their own uniforms, but pay no tuition or other fees for

this training. In addition, students are paid a small sum of money each month.

Further information regarding this training program may be obtained by writing to the U. S. Civil Service Commission, Washington, D. C., or to the Director of Physical Therapists in the Office of The Surgeon General, Washington, D.C.

PHYSICAL THERAPISTS IN OVERSEA THEATERS

The Army Nurse is your magazine, too. We are interested in your new work, surroundings, experiences, and just what goes on with you. Will you write to us so we can print your letters for others to read? Just address them to The Army Nurse, Office of The Surgeon General, Washington 25, D. C. We'll be looking for them.



Lt. HELEN D. LEDEBUHR, daughter of Mr. and Mrs. Louis W. Ledebuhr of 2739 North 18th St., Milwaukee, Wis., and Army nurse stationed at Lowry Field, Colorado, demonstrates the proper way of jumping from a sinking vessel with one of the famous "Mae West" life-jackets. The crossed arms keep the jacket from shooting upward when it hits the water. Lt. Ledebuhr, a member of a special water safety class conducted for Army nurses at the field, seems to be a little worried about jumping, and with good reason. Although the photo doesn't show it, she is standing atop a 50 foot tower with only the ice-cold waters of Washington Lake, Colorado, below her.

CONCERNING AWARDS

Outlined in W.D. Circular No. 337, dated 17 August 1944, is the procedure governing the supply and presentation of awards to persons on duty in the continental United States who have been cited in orders issued by overseas commanders. These awards include the (1) Distinguished Service Cross, (2) Legion of Merit, (3) Silver Star, (4) Distinguished Flying Cross, (5) Soldier's Medal, (6) Bronze Star Medal, (7) Air Medal, (8) Purple Heart, (9) Oak-Leaf Clusters applicable to above awards.

An individual cited or who shall be cited for any of the above awards and who has not received the medal or badge will make written request therefor to his immediate commanding officer, who will forward the request direct to the commander of the post, camp, or station at which the individual is serving. The request will refer to this circular and will be in the form of a signed statement to the effect that the medal or badge has not been previously received. A certified copy of the orders or extract citing the individual will accompany the request. Those individuals not having a copy of the order announcing the award will submit a request to The Adjutant General, Washington 25, D. C., for a copy of the order.

Personnel returning from overseas with decorations which should be engraved will bring this matter to the attention of their immediate commanding officers. Organization commanders are authorized to forward the unengraved decorations with supporting evidence of awards, such as orders or information disclosed in service records, to the proper supply depot as indicated in Paragraph 3 of Circular 337, with a request that the decorations be appropriately engraved in accordance with existing regulations.

RETENTION OF OFFICERS ON ACTIVE DUTY FOR LIMITED SERVICE

Army Service Forces Circular 285,

dated 30 August 1944, draws attention to Memorandum No. W 605-44 dated 21 February 1944 and to section 1, Circular No. 212, War Department, 1944. The subject is relative to combat wounded personnel who voluntarily desire to remain in the service and whose physical condition permits.

Present efforts to persuade combat wounded personnel eligible for discharge or retirement to remain in the service will be discontinued.

Those who elect to remain in the service will be disposed of by commanders of hospitals as prescribed in Paragraph 4, Circular No. 303, War Department, 1944, the reassignment of such personnel will be in grade.

QUESTIONS AND ANSWERS

Q. In the publication YANK, The Army Weekly, August 25 issue, appeared a statement that before the recent order to give nurses full military status, the Army Nurse Corps was an Auxiliary of the Army. If this is true, then we have been A.A.N.C. or Auxiliary Army Nurse Corps? I have been under the impression that we have been a Corps in the Army just as much so as Quartermaster, Signal or any other Corps. Am I wrong? I feel that if YANK is wrong then the soldiers in the Army should know that we have never been an Auxiliary. It is rather difficult to convince a soldier he is wrong when he shows you the publication in YANK. If I am wrong, I still want to know. Thank you for a much needed magazine for A.N.C.

A. The Army Nurse Corps was established by law in 1901 as an integral part of the military establishment, - a definite Corps in the Medical Department. (See Section 1, Act July 9, 1918, 40 Stat. 879; 10 U.S.C. 161, M. L. 1939, Section 78). The Army Nurse Corps was never an auxiliary unit. Nurses occupied a status similar to that of Chaplains, that is, had officer standing without command authority. They were given relative rank in 1920, which they held

until 10 July 1944; when the Executive Order signed by the President gave them full AUS standing. Members of the Army Nurse Corps who volunteered for the emergency on one year contract were "frozen" in the Army by the enactment of Public Law 338, 77th Congress approved December 13, 1941 for the duration and six months. Unlike the WAAC, which was a true auxiliary body, nurses did not have the option of accepting a commission in the AUS or being discharged, when Public Law 35D, dated 22 June 1944, authorized commissioned rank for nurses, dietitians, and physical therapists, but as stated in the Law "Members of the Army Nurse Corps so appointed and assigned shall not by acceptance of their appointment vacate their appointment in the Army Nurse Corps." Nurses who accepted the AUS commission hold a dual status, while members of the Nurse Corps who declined AUS commissions occupy the status of nurses with relative rank in the Army Nurse Corps.

Q. Would you please inform me as to whether the olive drab overseas cap is regulation for Army nurses? At some camps they say it is, at others we aren't allowed to wear them.

A. The olive drab and the beige overseas caps are authorized for wear by Army nurses. These caps should be designed like those worn by WACs but in D.D. Shade #51 and beige shade #55 to match Army nurses' uniforms.

Q. 1- May the nurses wear the hospital uniform to the Officer's Mess and to the Post Theatre? 2.- Are the flight nurses allowed to wear the flight suits (slacks) to the Officer's Mess and Club? 3.- Is there any special date the nurses are to go into brown and white seersucker uniforms?

A. 1- It depends on what you mean by hospital uniform and also whether you refer to the Officers' Mess located in the hospital area or to a formal Officers' Club which is often times called a 'Mess'. The brown and white seersucker, when worn with the jacket,

is considered a street uniform. "Hospital uniform" as its name implies is for wear in and about the hospital. 2--The flight nurses' authorization to wear slacks in the Officer's Mess and Club would be determined by individual Post and hospital commanding officers. 3--No special date has been set for nurses to discard the white uniform for the brown and white seersucker due to the indefinite dates of delivery to the various sections of the United States. At the present time it is authorized "as soon as complete uniform is obtained."

Q. What shade of brown ribbon will be worn on the seersucker caps? 2--Will the head dietitian at a station wear two wide bands on her cap the same as the principal chief nurse? 3--Where and how may we obtain additional seersucker uniforms, as five are inadequate. 4--In this new act, please explain the following: "All persons so appointed and assigned shall have authority in and about military hospitals as regards medical and sanitary matters and all other work within the scope of their professional duties next after other officers of the Medical Department and, except as above provided, shall exercise command only over those members of the Army of the United States specifically placed under their command." 5--If the khaki shirts are to be worn with a tie, why aren't the issued khaki shirts made accordingly?

A. 1 and 2--The wearing of ribbons on the hospital cap has been discontinued. (See August issue THE ARMY NURSE, page 9). 3--Additional seersucker uniforms will be made available for purchase at Quartermaster stores just as soon as all nurses have received their initial allotment. The first additional uniforms will no doubt go into ports of embarkation and staging areas in order that nurses from hospital ships and those nurses going overseas may be able to buy extra. 4--The "Medical Department" was written as such to include Dental Officers as well as Medical Officers. While MAC officers are of the Medical Department, they do

not enter the picture of professional authority. In administrative matters, unless an MAC officer were assigned to the Nurse Corps, there would be little chance of conflict in authority, since a Detachment Commander is in charge of all enlisted men REGARDLESS of conflicting orders, and a Principal Chief Nurse is in charge of the nurses. 5--Regulations permit the shirt to be worn open at the neck without the tie (Par. 15, AR 600-37) excepting that shirts with a neck-band cannot be worn without a necktie.

Q. Can one transfer from the Air Corps to a hospital ship or train? Are there many openings? To whom and where would one apply for transfer? How long would it take after acceptance till assignment? GM

A. It is not impossible to transfer from the Air Corps to the Transportation Corps, but it is extremely difficult. There are few openings on hospital ships and trains, but application should be made through your chief nurse to the Personnel Division, Army Air Forces. After acceptance, it would be a comparatively short time before assignment was made, the time consumed in getting the clearance would be the chief concern.

Q. In reading the May issue of the Army Nurse I noticed a paragraph stating that nurses overseas would be given the priority issue of summer uniforms. My unit has been in India, which is very definitely a "hot" climate, for 28 months and as yet we have not been issued any item of summer or winter O.D. uniforms. Neither have we been issued the striped seersucker. Why? 2--Would it be possible for Colonel Blanchfield to leave the office long enough to make a tour of the oversea theatres? I know it would be a great morale booster for the girls here.

A. Quite frankly we do not know why you have not received your issue of OD summer and winter uniforms. Supply and Distribution of uniforms is a function of the Office of the Quartermaster

General. Many factors enter into the uniform problem for oversea units, one of which is the priority for shipment governed by the theater commander. On checking with the ports on several occasions, it was found that the supplies were at the port but the commander of the theater concerned had placed so low a priority on this type of shipment that it would have been hard to estimate how soon it would be moving. In several cases it was possible to get the theater commander to change the priority, but it wasn't possible in all cases. We all know that priority on food and munitions would necessarily take precedence over wearing apparel if it were possible at all times to provide substitutes in the theater. 2--Since your letter was received here, a Director of Nurses has been assigned to the CBI who represents Colonel Blanchfield. Inasmuch as Colonel Blanchfield is responsible for directing the policy for our group of nurses, the value of a prolonged trip out of the office would be questionable.

Q. What overcoat, other than field coat issued by Quartermaster, is permitted to be worn by Army Nurses? 2--May tailored uniforms and overcoats conforming to regulations be taken overseas? IAB.

A. The field coat still remains the overcoat required for A.N.C. members, but the War Department recently authorized the wearing of a long wool overcoat of the same design and color (Shade # 52) as the long wool overcoat previously issued to officers of the Women's Auxiliary Army Corps and presently authorized for wear by officers of the WAC.

Q. In July issue of the Army Nurse it was stated that the seersucker slacks were to be worn only in line of duty. 2--What would one wear when going bicycle riding, would it be improper to wear the slacks?

A. The seersucker slacks are to be considered as a hospital uniform and

worn in lieu of the skirted uniform under conditions (such as hospital ships, trains, field units, etc.) where it is inconvenient or impractical to wear the dress. Leisure time slacks would be the appropriate dress for bicycling.

Q. In regard to the wearing of the service ribbon of the American Theater. The nurses returning from the South Pacific are given the American Theater and Pacific Theater ribbons upon arrival in San Francisco, but question their eligibility to wear both ribbons. EDU

A. The American Theater ribbon may be worn ONLY by those people who have served outside the continental limits of the United States within the bounds of the American Theater (see map on page 7 of June issue) for a period of 30 days or more. Coastal waters of the U.S. into or out of a port of embarkation does not constitute assigned service in the American Theater. Newfoundland, Canada, Puerto Rico, Panama, South America, etc., are localities in the American Theater.

Q. What about the plans for the demobilization of the Army Nurse Corps? What steps are to be taken in regard to our organization? Can you give us a few of the details? Here in the E.T.O. several hospitals have been sent over without their quota of nurses; consequently they have been supplied by the hospitals already here that have been functioning for quite some time. Most of the nurses have been on foreign service for a period of one to two years. Will this fact that the hospital they are now assigned to, being new and not in function for a considerable length of time, have any bearing on the demobilization of these nurses? Several of them feel that they will be the forgotten women in the service, just because of the fact that their hospital is new and they have so much more foreign service in, while the hospital unit itself is new in a foreign theater of operations?

A. Plans for demobilization of the

Army were announced by the War Department in September most of which applied to the enlisted personnel. This personnel will fill out an Adjusted Service Rating Card and under that system, a GI will get points for each month he has been in the Army (between 16 September 1940 and the date when German resistance is ended). If there is no formal German surrender or signed armistice, the War Department will simply designate a date as of which Nazi resistance will be arbitrarily declared to have ceased.

The soldier will get additional points for each month he has served overseas (overseas service means duty anywhere outside the States, any place for which he gets an overseas ribbon. Overseas service began the day he left a POE and ended the day he arrived back in a port in the States).

Officers overseas will be designated as surplus or required on the basis of need and their special abilities. They will not make out Adjusted Service Rating Cards. Once surplus officers are returned to the States, determination of whether they are essential and therefore to be reassigned and kept in service, or nonessential and therefore to be released, will be made on a basis similar to that applied to enlisted men.

In the case of WACs, enlisted women will be sorted out into surplus and necessary and essential and nonessential, just like enlisted men. WAC officers and nurses (who are commissioned officers) will go through the same procedure as male officers.

There is only one modification of the pattern. If an enlisted WAC, nurse, or WAC officer has a husband who is discharged, she also can get discharged by asking for it whether she is surplus or not.

Q. Information is requested regarding the wearing of the seersucker street uniform. May it be worn for:
Traveling?.....Yes.
Informal social activities?.....Yes.

Church?.....If you so desire. May it be worn after 5:00 p.m.? .. If you wish.

May it be worn during the winter months in a warm climate, or is it a "summer uniform?" Paragraph 6c, AR 600-37 (29 July 1943) lists the seersucker service uniform as a summer uniform. Therefore when military personnel are ordered into winter uniform, the seersucker uniform with jacket will not be worn.

Q. Do you have any information concerning a course for chief nurses being offered by the War Department? If so, I would appreciate it if you would send me this information, qualification needed, and how one would apply for such a course. RBF

A. No school for chief nurses is set up as such. Training on the job has been given by chief nurses to those individuals believed to possess administrative chief nurse qualifications. The Air Forces are experimenting with such a school at this time.

Q. What about courses of anesthesia for Army nurses. I am interested and would like to know if there are any openings or opportunities to take an anesthesia course. MAN

A. There are many opportunities to take a course in anesthesia. Apply through your chief nurse to the Director, Nursing Service of your service command.

Q. Why is it that Army nurses overseas and in the United States are still wearing overseas caps, and yet our orders read that only the service cap with bill may be worn? 2--Army nurses in general hospitals. Ground Force hospitals and in overseas units are wearing formal evening dresses. Why can't we? Nurses----!

A. War Department authorization has recently been obtained permitting Army nurses, physical therapists and dietitians to wear an overseas cap to conform in design to the WAC garrison cap. 2--Paragraph 1 AR 600-37 provides that the

uniform will be worn at all times whether on or off duty. Considerable authority is delegated to Commanding Generals of theaters on interpreting Army Regulations so as to best meet service needs.

Q. Will you please help to end an argument by telling us the correct way to place insignia and brass on the one-piece O.D. or beige dress? EB

A. The U.S. on the right collar, the caduceus on the left, the insignia on the shoulders.

Q. Our Finance Officer on this Base has been unable to determine the effective date of dependency allowance for nurses. Would appreciate your giving us the official date for this allowance. RES

A. 10 July 1944.

Q. Is there any way an Army nurse may obtain education to be a doctor through the government? If so, please give details. 2--How soon will nurses get allowance for dependents and how much back dependency will we get? GCA

A. There is no way an Army nurse may obtain education to be a doctor through the government. If your education was interrupted by the war, you may be able to get financial aid when the war is over to go back to college. See provisions of G.I. Bill of Rights. 2--Nurses are entitled to draw dependency allowance from 10 July 1944. See page 10, August issue of ARMY NURSE for Facts About Dependency Allowance. There is no such thing as "back pay for dependents" since before the nurses were given AUS status, they were not entitled to dependency allowance.

Q. How does one go about purchasing extra seersucker slack suits after having been issued her quota? We have tried to purchase them from Quartermaster and they informed us that they were unable to sell them until all units had received their issue.

We are stationed on a hospital ship and wear them continuously and find that more than four suits are needed. Our chief nurse has asked the Quartermaster to order them as a sales item. She was told that this is impossible as stated above. (2) Is it possible to file an application for Regular Army at the present time?

A. From the Quartermaster General's Office comes this reply: "The Chief of Transportation has been granted authority

to establish Sales Stores at the installations listed below. Slacks, Shirts, Jackets, and Caps, Cotton, Seersucker, Nurse, in addition to other items have been authorized for stockage at these sales stores: Camp Kilmer, New Jersey; Camp Patrick Henry, Virginia; Charleston Port of Embarkation; Fort Lawton, Washington; Los Angeles Port of Embarkation. 2--Transfers from the Reserve to the Regular Army are not being made at this time.

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